

**RESOLUTION AUTHORIZING THE COUNTY EXECUTIVE TO SIGN  
DOCUMENTS FOR THE EMS COST RECOVERY PROGRAM  
ON BEHALF OF THE COUNTY**

**WHEREAS**, on September 9, 2009, the Albemarle County Board of Supervisors enacted Chapter 6, Article V of the Albemarle County Code, which authorizes the Albemarle County Department of Fire and Rescue and any volunteer rescue squad that obtains a permit from Albemarle County to charge fees for emergency medical services (EMS) vehicle transports; and

**WHEREAS**, the County procures the services of private companies to act as the County's billing agent for its EMS vehicle transport cost recovery program; and

**WHEREAS**, the County must enroll in the Medicare and Medicaid programs in order for the County's billing agent to bill Medicare and Medicaid for EMS vehicle transports, and updated enrollment forms must be filed when the billing agent changes or when there are changes in the contact information of the billing agent or Albemarle County Fire Rescue staff; and

**WHEREAS**, the enrollment documents require the signature of an authorized official who has been authorized by the Board to enroll the County in the programs; and

**WHEREAS**, the efficiency of government is improved by delegating to the County Executive the authority to sign any documents necessary for the cost recovery program, including but not limited to Medicare and Medicaid program enrollment documents.

**NOW, THEREFORE, BE IT RESOLVED** that the Albemarle County Board of Supervisors hereby authorizes the County Executive to execute, on behalf of Albemarle County, all documents for the cost recovery program, including but not limited to Medicare and Medicaid program enrollment forms, provided that such documents are approved as to form and content by the County Attorney.

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I, Ella W. Jordan, do hereby certify that the foregoing is a true correct copy of a resolution adopted by the County Board of Supervisors of Albemarle County, Virginia at a regular meeting held February 3, 2016.

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Clerk, County Board of Supervisors

|               | Aye   | Nay   |
|---------------|-------|-------|
| Mr. Dill      | _____ | _____ |
| Ms. Mallek    | _____ | _____ |
| Ms. McKeel    | _____ | _____ |
| Ms. Palmer    | _____ | _____ |
| Mr. Randolph  | _____ | _____ |
| Mr. Sheffield | _____ | _____ |